



Connection Knowledge Nurse with Attitude and Implementation Target Safety Patient

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Abstract. Patient safety is an important part of health care. Patient safety is important in preventing and reducing risks, errors and injuries that can occur during service. The role of nurses in improving patient safety in hospitals must be able to actively participate in realizing it properly. Nurses' knowledge of patient safety greatly influences the performance of nurses in implementing and implementing patient safety actions in hospitals. This study uses a descriptive correlation research design type of quantitative method with a cross-sectional research approach. The results of this study are expected to be a reference for improving the quality of nurses' professionalism in implementing patient safety. Based on data analysis using the Sparman Rank statistical test between nurses' knowledge and patient safety attitudes, the results of the p value were 0.033 (<0.05) which means Ha is accepted, where there is a significant relationship between nurses' knowledge and patient safety attitudes, with a correlation coefficient value of 0.428, namely the level of relationship strength is sufficient, with a positive correlation direction. The results of this study are expected to be a reference for improving the quality of nurses' professionalism in implementing patient safety.

Keywords: Patient Safety, Nurse Role, Safety



Introduction

Safety patient is part important from service health . Safety patient formed from complexity in system service health and improvement injury patients in facilities service health . Safety patient play a role important in prevention and reduction risks , errors and injuries that can occur happen during the service process (WHO, 2017).

Safety has been become Global issues also include House sick. There are six target safety patient at home Sick that is accuracy identification, improvement communication effective, improvement security necessary medication be aware, certainty appropriate location, right patient, subtraction risk fall. Safety patient is priority main For implemented and things the related with issue quality and image house sick (Ministry of Health, 2011).

Safety Patient is a the system that makes care patient more safe, covering assessment risk, identification and management risk patients, reporting and analysis incident, ability Study from incidents and actions he continued, and implementation solution For minimize the emergence risk and prevention the occurrence injuries caused by mistakes consequence carry out a action or No take the action that should be

taken (PMK No. 11, 2017). Safety patient depicted as effort collaborative by providers service health in system integrated For prevent error medical or injuries that can avoided with the aim of protect patients (Kim et al., 2015).

The role of nurses increase safety patient at home Sick must can participate active in realize with good. Knowledge nurse about patient safety is very influential to performance nurse That Alone in

implementation and execution action regarding patient safety at home sick. Within the scope of patient safety knowledge nurse is related things with much needed commitment in effort build culture safety patients (Wijaya et al., 2016).

WHO report states that every the year is 134 million incident injury occurs in low-middle income countries, where number 2.6 million deaths but 50% injured is injuries that can prevented (WHO, 2017). Injuries that cause deaths in the United States of America are at 44,000-98,000, which is No direct more Lots compared to death consequence accident Then cross, cancer breast and HIV AIDS, while Health Care-Associated Infection HAI estimates in Europe 1 in 20 patients at home (estimate) from 4.1 million patient). While that, risk HAI occurs 2-20x more high in developing countries. Furthermore, WHO issued WHA resolution 55.18 in quality service: safety patient where the State is asked give attention full to the safety problem patient and build as well as strengthening the science-based system for increase safety patients (WHO, 2015). The target of SDGs 3.8 is focuses on achieving Universal Health Coverage (UHC), namely " Protection risk financial, access to service maintenance quality health, and access For get safe, effective, quality and affordable medicines and vaccines For all . In an effort to achieve the target, WHO sets draft coverage effective refers to UHC as approach For reach level better health good and make sure quality service prioritize safety patient. Therefore that, WHO determined safety patient as priority global health (WHO, 2017).

The Joint Commission International (JCI) as institution accreditation international and Commission Hospital Accreditation (KARS) makes safety patient as one of the standards that must be met filled House Sick in give



services (Joint Commission International, 2017).

Apart from attitude in improvement safety patient, implementation safety patient in practice nursing is matter crucial. JCI and KARS each delivered target safety patient consists of of 6 targets, namely identification patient with right, improve communication effective, improve high alert medicine safety , implementation of the right-location, rightprocedure, right-patient process undergoing action and procedure / ensure security operation, reduce risk infection in service health and reduce risk injury Because fall.Based on results review literature, in Indonesia data was obtained that nurse do implementation safety with Good as much as 44.26%. Can concluded Still more from 50% of nurses Not yet do implementation safety patient with good (Harus & Sutriningsih, 2015; Limbong, 2018; Rivai et al., 2016; Sumarni, 2017; Yusuf, 2017). Meanwhile, the average score implementation six target safety patient from 4 houses Indonesia's illness is 64.81% (Insani & Sundari, 2018; Neri et al., 2018; Setiyani et al., 2016; Sundoro et al., 2016). This Still Far below the KARS target, namely 100% achievement. If the nurse No carry out implementation safety patient with well, worried can trigger incident safety patient at home sick. Incident safety patient is every an incident that did not occur intentional and conditions that result or potential result in injuries that can prevented in patients (Minister of Health Regulation 11/2017).

In Indonesia based on Incident data Safety Published patients Committee Safety Hospital Patients (KKPRS) there were 114 reports incident safety patients in 2009, 103 reports in 2010, and 34 cases that occurred in the period January-April 2011 (Quarter 1) in the Banten region amounting to 23.67%, Jakarta 5.15%, Lampung 3.9%, East Java 1.3%, and as many as 2.6% of the data was

not available. complete. Based on ownership House sick in the same period found that House Sick government areas that have percentage more low by 6.18% compared to with House Sick private amounting to 28.82% (KKP-RS, 2011). In 2015 there were Incident Almost Injuries (KNC) as many as 197 cases, KTD 330 cases and Non-Injury Incidents (KTC) 205 cases, while from incident incident which resulted in death as many as 29 cases, injuries serious 9 cases, injury moderate 104 cases, 2 minor injuries 132 cases and no 458 cases of injury. Within the scope safety patient health human resources knowledge is related things with much needed commitment in effort For build culture safety patients (Cahyono, 2015).

Nurse must realize his role as safety patient at home Sick so that must can participate active in realize with good. Knowledge nurse about patient safety is very influential performance That nurse Alone in implementation and execution action regarding patient safety at home sick. Within the scope of patient safety knowledge nurse is related things with much needed commitment in effort build culture safety patients (Wijaya et al., 2016).

Nurse in give care nursing must own correct knowledge, skills, and attitudes For handle complexity maintenance health. Without adequate knowledge, energy health including nurse. No Can implement and maintain culture safety patients (Myers, 2012). expected the more nurses are also tall in understand importance implementation safety patient safety provided to patient in service nursing (Darliana, 2016).

According to Darlinana (2016) Efforts to implement patient safety are very dependent from knowledge nurse. If nurse implementing patient safety is based on adequate knowledge, then patient safety behavior by nurses the nature long lasting. A



nurse in give care nursing must own correct knowledge, skills, and attitudes For handle complexity maintenance health. Knowledge is results from know through sensing to a object certain and interactions social so that formation action somebody.

Knowledge nurse about patient safety is very important For push implementation of patient safety program. Nurse must understanding patient safety, existing elements in patient safety, patient safety goals , patient safety efforts as well protection self during Work. The patient safety program is a system Where House Sick make care patient more safe . Inside system the covering evaluation risk like risk fall or infection cross , identification and management related things with risk patients, reporting and analysis incident or incident No expected, ability Study from incidents and actions he continued as well as implementation solution For minimize the emergence risk (Ministry of Health of the Republic of Indonesia, 2008).

Nurse must show positive attitude in support the patient safety program so that carry out practice nursing in a way safe . Attitude support prevention transmission disease. Washing hand is one of the effective standard precaution components in prevent transmission infection. In addition use tool protector self like sarong hands and masks for prevent risk contact with phatogens (World Organization (WHO, Health According to research conducted Bawelle, et al (2013) in space take care Hospitalization at Liun Kendage Regional Hospital The year entitled connection knowledge and attitude nurse with implementation safety patient (patient safety).

Nurse in give care nursing must own correct knowledge, and attitude For handle complexity maintenance health. Without adequate knowledge and attitude, energy health including nurse No Can implement and maintain culture safety patients (Myers, 2012).

Solutions to achieve patient safety in the environment House sick, steps first thing to do done is do socialization with various methods and media including conduct seminars, workshops for nurses and officers health other through posters and leaflets, monitoring and evaluation implementation of SOP periodically by the committee nursing is also necessary done For increase compliance implementation identification patient so that can lower number incident safety patients, besides That in its implementation required tool supervision as evaluation and improvement (Fatimah et al., 2018).

RESEARCH METHODS

Research This use type design study descriptive correlation method quantitative with approach cross sectional research. In this research this is what it becomes its population is all over nurses who work in hospitals. Samples in study This is nurse with criteria its inclusion is as following: A capable nurse For become respondents. Criteria exclusion from study This among others nurses No respond and fill inform concentration as Respondent study.

Research location is place Where he did research, with set location study become very important stage in A research. In research This Alone located at Stikes Telogorejo Semarang. The time is study This has implemented start from the determination process title until revision that is since May-August 2022.

RESEARCH RESULT

1. Characteristics Respondent



Table 4.1
Distribution frequency Respondent based on age, gender gender, and level education
(n=25)

Variables	Frequency	Percent (%)
Age		
Early Adulthood (20-35)	20	80.0%
Late Adulthood (36-45)	5	20.0%
Early Elderly (45-55)	0	0.0%
Type Sex		
Man	1	4.0%
Woman	24	96.0%
Education		
D3	25	100.0%
S1	0	0.0%
S2	0	0.0%
Total	25	100.0

Based on table 4.1 is obtained majority nurse aged 20-35 years including in in category mature beginning as many as 20 respondents (80.0%) with type sex majority Woman as many as 5 respondents (20.0%). All nurse D3 nursing education as many as 25 respondents (100.0%).

2. Knowledge Overview Nurse

Table 4.2 Knowledge Overview Nurses (n=25)

Knowledge Overview Nurses (11–23)		
Knowledge Nurse	Frequency	Percent (%)
Good	17	68.0%
Not enough	8	32.0%
Total	25	100.0

Based on table 4.2 regarding distribution frequency knowledge nurse show from The number of 17 respondents (68.0%) had level knowledge good nurses and as many as 8 respondents (32.0%) have knowledge not enough.

3. Attitude Description Nurse

Table 4.3
Attitude Overview Safety Patients (n=25)

Attitude Overvi	ew Salety Fatter	ts (H-23)
Attitude Safety Patient	Frequency	Percent (%)
Good	14	56.0%
Not enough	11	44.0%
Total	25	100.0

Based on table 4.3 regarding distribution frequency Attitude Safety nurse show that 14 respondents (56.0%) have Good attitude and as many as 11 respondents (44.0%) have poor attitude.

4. Implementation Overview Target Safety Patient

Table 4.4
Attitude Overview Safety Patients (n=25)

Attitude Overview Safety Patients (n=25)		
Attitude Safety	Frequency	Percent
Patient		(%)
Good	14	56.0%
Not enough	11	44.0%
Total	25	100.0

Based on table 4.4 regarding distribution frequency Implementation target safety patient show that 14 (56.0%) respondents nurse Already implement target safety with good and as many as 11 (44.0%) respondents not enough implementing safety suggestions patient .

5. Analysis Connection Knowledge nurse with Attitude Safety Patient .

Table 4.5
Analysis Connection Knowledge Nurse with
Attitude Safety Patient



(n=65)		
Variables	R	P
		value
Knowledge Nurse - Attitude Safety	0.428	0.033
Patient		

Based on Table 4.7 shows the results of the correlation test data. using the Sparman Rank statistical test between knowledge nurse with attitude safety patient obtained results p-value 0.033 (<0.05) which means Ha: accepted , where there is significant relationship between knowledge nurse with attitude safety patient , with mark coefficient correlation 0.428 , namely level strength connection enough , with direction correlation positive .

6. Analysis Connection Knowledge nurse with Attitude Safety Patient .

Table 4.6 Analysis Connection Knowledge Nurse with Attitude Safety Patient (n=65)

Variables	R	P value
Knowledge Nurse	0.428	0.033
 Attitude Safety 		
Patient		

Based on Table 4.7 shows the results of the correlation test . using the Sparman Rank statistical test between knowledge nurse with attitude safety patient obtained results p-value 0.033~(<0.05) which means Ha is accepted , where there is significant relationship between knowledge nurse with attitude safety patient , with mark coefficient correlation 0.428 , namely level strength connection enough , with direction correlation positive .

DISCUSSION

1. Characteristics Respondents

Characteristics average nurse respondent own age 25-35 years as many as 20 respondents (80.0%). Somebody currently experience development performance physical and all function body organ system man functioning optimally is characteristic features somebody enter age mature beginning. Supported study Nurningsih (2014) Characteristics nurse based on age is very influential to performance practice nursing, where the more old age nurse so in accept A work will the more responsible responsible and experienced.

This matter in line with with study Yusnaeni (2016), obtained age productive nurse implementer with proportion age almost all in all group age mature early 26-35 years old. Nurse age mature beginning have amount dominant in care stay because of amount and responsibility complex answer so that need ability optimal physical condition besides from good knowledge, attitude and skills. Characteristics Respondent nurse according to type sex obtained part big nurse is Woman totaling 24 respondents (96.0%). In line with Vino Rika Nofia's research (2016) states that majority the dominant nurse is nurse Woman as many as 1 respondent (4.0%), this the show that work nurse Still Lots in demand Woman compared to man Because nursing Still identical with suitable and appropriate job with characteristic more women patient, weak gentle, and caring.

This matter in line with Friedman's research (2012) said that man own characteristic aggressive and women own characteristic caregiver. According to him part big energy woman poured out For pregnancy, childbirth and breastfeeding, so this maternal instinct make woman own advantages in caring for and maintaining good communication with other people. This greatly affects



communication therapeutic carried out by nurses women who have characteristic to care for and nurture compared to with nurse man.

Characteristics Respondent nurse according to education show in a way detailed nurse educated last D3 Nursing as many as 25 respondents (100.0%). In line with study Awaludin (2020) stated that that the dominant nurse room take care stay that is educated The nursing profession consisted of 27 respondents (84.4%) out of 32 nurses.

2. Knowledge Overview Nurse Research result knowledge nurse show from The number of 17 respondents (68.0%) had level knowledge good nurses and as many as 8 respondents (32.0%) have knowledge not enough.

Importance nurse increase knowledge explained by (Setiyajati, 2014) efforts For increase knowledge and education is a important thing in context safety patient Because knowledge support skills that can Assumption accountable researcher knowledge nurse can increase with increase education that can accountable. Competent nurses is nurses who must own knowledge well, because That knowledge is very important thing to do owned by a nurse. A nurse who has knowledge okay then nurse the expected capable apply care nursing with effective and efficient.

Supported with study Yusfar (2017), that level knowledge nurse experienced sufficient (65.0%) or as many as 39 people, and almost half of it own ability knowledge good (28.3%) or as many as 17 people, and some small own ability less (6.7%) or as many as 4 people.

3. Attitude Description Nurse Research Hail Attitude Safety nurse show that 14 respondents (56.0%) have Good attitude and as many as 11 (44.0%) respondents own poor attitude.

According to Wawan (2011) Factors that influence attitude according to among them is experience personal, the influence of others is considered important, influence culture, mass media, institutions educational and religious institutions as well existence factor emotional. While Rusmanto (2013) in his research state that factors that influence attitude among them is type gender, age, education, income and knowledge nurse professional should can become figure the ideal nurse who always be a role model for nurse vocational in give care nursing.

Supported with study Selleya (2013), found that 95% of nurses at home Sick have attitude Good to implementation safety patient. Attitude Respondent about safety patient at each room Already Good This based on results study namely (92.3%). While attitude Respondent with implementation safety patient not enough namely (5.0%).

4. Implementation Overview Target Safety Patient

Research result Implementation target safety patient show that 14 respondents (56.0%) were nurses Already implement target safety with good and as much as 11 (44.0%) respondents not enough implementing safety suggestions patient.

According to (Yasriq, 2019) stated that There is a number of factor affecting achievement implementation safety patient that is: factor individual, factor psychology, factors organization, length of service, knowledge, attitude and communication. From several factor the knowledge is a very important domain For implementation safety patient. If nurse apply safety patient based on



adequate knowledge, then behavior safety patient by nurse the will nature lasting (long lasting) (Darliana, 2016).

Supported with results study Mardika (2017), shows that what implementation target safety patient as much as (74.2%) 23 nurses Already good . Mostly nurse Already Good in implement target safety patient . This is show concern nurse to implementation target safety patient . Although expected results of implementation target safety patient according to KARS (2013) it should be reach 100%.

5. Analysis Connection Knowledge nurse with Attitude Safety Patient .

Based on data analysis using the Sparman Rank statistical test between knowledge nurse with attitude safety patient obtained results p -value 0.033 (<0.05) which means Ha is accepted , where there is significant relationship between knowledge nurse with attitude safety patient , with mark coefficient correlation 0.428 , namely level strength connection enough , with direction correlation positive .

Supported with theory Notoadmodjo (2012) said behavior based on knowledge generally nature lasting Because before somebody adopt behavior new the process occurs.

Supported with results study Setiyajati (2014) said that there is meaningful relationship between attitude nurse with implementation safety patient. Researcher assume that if attitude nurse Good will influence action nurse in do something action. On the contrary if attitude not enough so actions taken nurse about safety patient the less. Implementation system safety patients in various House Sick There is aspects that must be built or improved between them attitude officer executor service health and system or organization. Attitude officer health

especially nurse is readiness nurse in do a action taken from experience that gives influence dynamic and focused to response patients (Sunaryo, 2013).

Supported with Sarah et al.'s research (2017) shows that results chi-square test analysis obtained results with $\rho=0.042$ which shows there is meaningful relationship between level knowledge with incident wound stab needle injection to the nurse .

Study This supported by research conducted by Ermawati (2016), it was found that results study with a ρ value of 0.001. The OddsRatio value of 3,900 means respondents whose knowledge Good own opportunity his behavior the more good and so on the contrary .

6. Analysis Connection Knowledge nurse with Implementation target safety patient .

Based on Data analysis obtained data from correlation test results using the Sparman Rank statistical test between knowledge nurse with implementation safety patient obtained results p -value 0.001 (<0.05) which means Ha is accepted , where there is significant relationship between knowledge nurse with implementation safety patient , with mark coefficient correlation 0.632 , namely level strength connection strong , with direction correlation positive .

Supported with Budiono's theory (2014), which states that part big nurse has carry out with good management program patient risk falls which include: screening, installation bracelet risk fall, education patients and families with using leaflets, education risk patient fall, management patient risk fall, handling patient risk fall.

CONCLUSION & SUGGESTIONS



CONCLUSION

- 1. Based on characteristics Respondent is at in category age mature early (20-35 years) is (80.0%), type sex is female (96.0%). D3 nursing education (100.0%).
- 2. Knowledge nurse in Category good (32.0%), Attitude nurse in category good (44.0%), Target Safety Patient in category Good as many as 17 respondents (32.0%) on the Guttman scale.
- 3. Based on study obtained result +0.428 and p-value 0.012 (p <0.005), which means that There is connection knowledge nurse with attitude nurse with strength connection low, pointing positive (p-value of 0.012, r = +0.428).
- 4. Based on study obtained result +0.632 and p-value 0.001(p < 0.005), which means that There is connection knowledge nurse with Target safety Patients . With strength connection low , and pointing positive r = +0.632 and p-value 0.001 (p < 0.005).

SUGGESTION

- 1. For Health Services
 Research results This can utilized by hospital management in the service health as indifference For give knowledge to nurse related target safety patient.
- 2. For Educational Institutions
 Research result This can give information
 about knowledge to student about
 Knowledge nurse with Attitude and
 Implementation target safety patient.
- 3. For Researchers Furthermore
 Research result This capable develop
 study related improvement knowledge and
 attitude nurse to Standard Safety Patient.

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